

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|-------------|-----------|---------|
| FEE DETERMINATION | | | |
| O.I.P.E. CLASSIFIER | | 12 | 2/16 |
| FORMALITY REVIEW | Z. P. H. C. | 3 C 8 5 1 | 03-02-d |
| RESPONSE FORMALITY REVIEW | mm | 657 | 6/6/01 |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral) ... Canceled A Appeal
 ÷ Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | 11-5-02 |
| 1 | ✓ |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
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| Claim | Date |
|----------|---------|
| Final | |
| Original | 11-5-02 |
| 51 | ✓ |
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| Claim | Date |
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| Final | |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

(LEFT INSIDE)